

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

Chapter you are filing under:

☐ Chapter 7☒ Chapter 11☐ Chapter 12☐ Chapter 13☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself**About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

William

First name

Earl

Middle name

Bring your picture identification to your meeting with the trustee.

Woodard

Last name and Suffix (Sr., Jr., II, III)

Shirley

First name

Ruth Rogers

Middle name

Woodard

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**xxx-xx-2603****xxx-xx-8293**

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

☐ I have not used any business name or EINs.

DBA Individualized Treatment Solution, LLC

Include trade names and *doing business as* names

Business name(s)

EINs

☐ I have not used any business name or EINs.

DBA Individualized Treatment Solution, LLC

Business name(s)

EINs

5. Where you live

**1747 Grissett Rd. SW
 Supply, NC 28462**

Number, Street, City, State & ZIP Code

Brunswick

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.
 Explain. (See 28 U.S.C. § 1408.)

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.
 Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☐ Chapter 7
- ☒ Chapter 11
- ☐ Chapter 12
- ☐ Chapter 13
-
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
-
9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
- ☐ Yes.
- | | | |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
-
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No
- ☐ Yes.
- | | |
|-----------------------------|---------------------------|
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ |
| Case number, if known _____ | |
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ |
| Case number, if known _____ | |
-
11. **Do you rent your residence?** ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

☒ No. Go to Part 4.

☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

 Name of business, if any

 Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

☐ No. I am not filing under Chapter 11.

☒ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

☒ No.

☐ Yes. What is the hazard? _____

If immediate attention is needed, why is it needed? _____

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property? _____

 Number, Street, City, State & Zip Code

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known)

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a.	Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> No. Go to line 16b. <input type="checkbox"/> Yes. Go to line 17.
	16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input checked="" type="checkbox"/> Yes. Go to line 17.
	16c.	State the type of debts you owe that are not consumer debts or business debts <hr/>

17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes.	I am not filing under Chapter 7. Go to line 18. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input type="checkbox"/> No <input type="checkbox"/> Yes
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18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
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19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input checked="" type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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Part 7: Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ William Earl Woodard**William Earl Woodard**

Signature of Debtor 1

/s/ Shirley Ruth Rogers Woodard**Shirley Ruth Rogers Woodard**

Signature of Debtor 2

Executed on **May 15, 2019**

MM / DD / YYYY

Executed on **May 15, 2019**

MM / DD / YYYY

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ George Mason Oliver

Signature of Attorney for Debtor

Date

May 15, 2019

MM / DD / YYYY

George Mason Oliver 26587

Printed name

The Law Offices of

Firm name

Oliver & Cheek, PLLC

PO Box 1548

New Bern, NC 28563

Number, Street, City, State & ZIP Code

Contact phone **252-633-1930**

Email address

26587 NC

Bar number & State

Certificate Number: 03621-NCE-CC-451776501

CERTIFICATE OF COUNSELING

I CERTIFY that on May 14, 2019, at 11:39 o' clock AM EDT,

William E. Woodard received from

Credit Card Management Services, Inc.,

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the

Eastern District of North Carolina, an individual [or group] briefing that compiled

with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of

the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: May 14, 2019

By /s/Wafaa Elmaaroufi

Name Wafaa Elmaaroufi

Title Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 03621-NCE-CC-451776502

CERTIFICATE OF COUNSELING

I CERTIFY that on May 14, 2019, at 11:39 o' clock AM EDT,

Shirley R Woodard received from

Credit Card Management Services, Inc.,

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the

Eastern District of North Carolina, an individual [or group] briefing that compiled

with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: May 14, 2019

By /s/Wafaa Elmaaroufi

Name Wafaa Elmaaroufi

Title Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill in this information to identify your case:

Debtor 1 **William Earl Woodard**
 First Name Middle Name Last Name

Debtor 2 **Shirley Ruth Rogers Woodard**
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number _____
 (if known)

☐ Check if this is an amended filing

B 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.**Unsecured claim**

1 First National Bank Attn: Officer, Agent, Managing Agt 4140 E. State Street Hermitage, PA 16148	What is the nature of the claim? 115 Holden Beach Rd. \$ \$439,210.00 Shallotte, NC 28470 Brunswick County	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply
_____ _____ Contact _____ _____ Contact phone _____	Does the creditor have a lien on your property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Total claim (secured and unsecured) \$ \$879,600.00 Value of security: - \$ \$440,390.00 Unsecured claim \$ \$439,210.00	

2 First National Bank Attn: Officer, Agent, Managing Agt 4140 E. State Street Hermitage, PA 16148	What is the nature of the claim? 115 Holden Beach Rd. \$ \$96,114.30 Shallotte, NC 28470 Brunswick County	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply
_____ _____ Contact _____ _____ Contact phone _____	Does the creditor have a lien on your property?	

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known) _____

Contact _____

Contact phone _____

☐ No
☒ Yes. Total claim (secured and unsecured) \$ **\$96,114.30**
 Value of security: - \$ **\$440,390.00**
 Unsecured claim \$ **\$96,114.30**

3

Maxine Pughsley
2740 NW 13 CT
Fort Lauderdale, FL 33311

Contact _____

Contact phone _____

What is the nature of the claim? _____ \$ **\$25,000.00**

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

4

Bank of America
Attn: Officer/Agent/Managing
Agent
PO Box 15019
Wilmington, DE 19886-5019

Contact _____

Contact phone _____

What is the nature of the claim? _____ \$ **\$17,401.96**

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

5

Capital One
Attn: Officer/Agent/Managing
Agent
3451 Harry S. Truman Blvd
Saint Charles, MO 63301

Contact _____

Contact phone _____

What is the nature of the claim? _____ \$ **\$14,195.66**

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

6

Bishop Stanley Banks
251 Ashmoore Lane

What is the nature of the claim? _____ \$ **\$13,000.00**

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known) _____

Riegelwood, NC 28456

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact _____

Contact phone _____

7

Bishop Staccato Powell
2339 West Hammer Lane
Suite C 153
Stockton, CA 95209

What is the nature of the claim? _____

\$ **13,000.00**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact _____

Contact phone _____

8

Capital One
Attn: Officer/Agent/Managing
Agent
PO Box 71083
Charlotte, NC 28272-1083

What is the nature of the claim? _____

\$ **11,376.15**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact _____

Contact phone _____

9

Barclays Bank Delaware
Attn: Bankruptcy
PO Box 1337
Philadelphia, PA 19101

What is the nature of the claim? _____

\$ **9,862.46**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____

Contact _____

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known) _____

Contact phone _____

Value of security: _____
 Unsecured claim _____

- \$ _____
 \$ _____

10 **BB&T** **What is the nature of the claim?** **\$ \$9,554.27**

Attn: Officer/Agent/Managing Agent
PO Box 580340
Charlotte, NC 28258-0340

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact _____

Contact phone _____

11 **Barclay Card** **What is the nature of the claim?** **\$ \$7,911.00**

Attn: Officer/Agent/Managing Agent
4000 White Clay Center Dr
Newark, DE 19711

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact _____

Contact phone _____

12 **Chase Card Services** **What is the nature of the claim?** **\$ \$7,029.00**

Attn: Officer/Agent/Managing Agent
PO Box 15298
Wilmington, DE 19850-5298

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact _____

Contact phone _____

13 **Deacon Isreal Jones** **What is the nature of the claim?** **\$ \$7,000.00**

1250 Cedar Grove Rd SW
Supply, NC 28462

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known) _____

Contact _____

Contact phone _____

Does the creditor have a lien on your property?

- ☒ No
- ☐ Yes. Total claim (secured and unsecured) \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

14

Tommy Woodard, Jr
2369 Gore Road
Longs, SC 29568

Contact _____

Contact phone _____

What is the nature of the claim? \$ **\$5,000.00****As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed
- ☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
- ☐ Yes. Total claim (secured and unsecured) \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

15

BB&T
Attn: Officer, Agent, Managing
Agt
PO Box 1847
Wilson, NC 27894

Contact _____

Contact phone _____

What is the nature of the claim? \$ **\$4,675.82****As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed
- ☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
- ☐ Yes. Total claim (secured and unsecured) \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

16

BB&T
Attn: Officer, Agent, Managing
Agt
PO Box 1847
Wilson, NC 27894

Contact _____

Contact phone _____

What is the nature of the claim? \$ **\$3,702.24****As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed
- ☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
- ☐ Yes. Total claim (secured and unsecured) \$ _____
- Value of security: - \$ _____
- Unsecured claim \$ _____

17What is the nature of the claim? \$ **\$3,470.26**

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known) _____

BB&T

**Attn: Officer, Agent, Managing
 Agt
 PO Box 1847
 Wilson, NC 27894**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact _____

Contact phone _____

18**BB&T**

**Attn: Officer, Agent, Managing
 Agt
 PO Box 1847
 Wilson, NC 27894**

What is the nature of the claim? _____ \$ **\$3,288.14**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) \$ _____
 Value of security: - \$ _____
 Unsecured claim \$ _____

Contact _____

Contact phone _____

19**One Main Financial**

**Attn: Officer, Agent, Managing
 Agt
 5051 Main Street, Ste 14
 Shallotte, NC 28470**

What is the nature of the claim? **2008 Lincoln
 Navigator L4x2
 176,000 miles** \$ **\$2,847.67**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☒ Yes. Total claim (secured and unsecured) \$ **\$12,765.67**
 Value of security: - \$ **\$9,918.00**
 Unsecured claim \$ **\$2,847.67**

Contact _____

Contact phone _____

20**One Main Financial**

**Attn: Officer, Agent, Managing
 Agt
 5051 Main Street, Ste 14
 Shallotte, NC 28470**

What is the nature of the claim? **2010 Ford Taurus LTD
 61560 miles** \$ **\$1,673.84**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Debtor 1 **William Earl Woodard**
 Debtor 2 **Shirley Ruth Rogers Woodard**

Case number (if known) _____

Does the creditor have a lien on your property?

_____	<input type="checkbox"/> No	
Contact _____	<input checked="" type="checkbox"/> Yes. Total claim (secured and unsecured)	\$ \$11,022.84
_____	Value of security:	- \$ \$9,349.00
Contact phone _____	Unsecured claim	\$ \$1,673.84

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

X /s/ William Earl Woodard
William Earl Woodard
 Signature of Debtor 1

X /s/ Shirley Ruth Rogers Woodard
Shirley Ruth Rogers Woodard
 Signature of Debtor 2

Date May 15, 2019

Date May 15, 2019

**United States Bankruptcy Court
Eastern District of North Carolina**

In re **William Earl Woodard
Shirley Ruth Rogers Woodard**

Debtor(s)

Case No.
Chapter

11

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: **May 15, 2019**

/s/ William Earl Woodard

William Earl Woodard

Signature of Debtor

Date: **May 15, 2019**

/s/ Shirley Ruth Rogers Woodard

Shirley Ruth Rogers Woodard

Signature of Debtor

WILLIAM EARL WOODARD
1747 GRISSETT RD. SW
SUPPLY, NC 28462

SHIRLEY RUTH ROGERS WOODARD
1747 GRISSETT RD. SW
SUPPLY, NC 28462

GEORGE MASON OLIVER
THE LAW OFFICES OF
OLIVER & CHEEK, PLLC
PO BOX 1548
NEW BERN, NC 28563

SECRETARY OF TREASURY
ATTN: MANAGING AGENT
1500 PENNSYLVANIA AVE NW
WASHINGTON, DC 20220

UNITED STATES ATTORNEY
310 NEW BERN AVENUE
FEDERAL BLDG SUITE 800
RALEIGH, NC 27601-1461

US SECURITIES & EXCHANGE
ATTN: MANAGER OR AGENT
950 E. PACES FERRY RD., NE S90
ATLANTA, GA 30326-1382

NC DEPT OF COMMERCE
ATTN: SHARON A. JOHNSTON
PO BOX 25903
RALEIGH, NC 27611

NC DEPT OF REVENUE
ATTN: A. FOUNTAIN
PO BOX 1168
RALEIGH, NC 27602-1168

INTERNAL REVENUE SERVICE
ATTN: MANAGER OR AGENT
PO BOX 7346
PHILADELPHIA, PA 19101-7346

AMERICAN EXPRESS
C/O BECKET AND LEE LLP
PO BOX 3001
MALVERN, PA 19355-0701

AMERICAN EXPRESS
ATTN: OFFICER/AGENT/MANAGING AGENT
PO BOX 6985
BUFFALO, NY 14240-6985

BANK OF AMERICA
ATTN: OFFICER/AGENT/MANAGING AGENT
PO BOX 15019
WILMINGTON, DE 19886-5019

BARCLAYS BANK DELAWARE
ATTN: BANKRUPTCY
PO BOX 1337
PHILADELPHIA, PA 19101

BARCLEY CARD
ATTN: OFFICER/AGENT/MANAGING AGENT
4000 WHITE CLAY CENTER DR
NEWARK, DE 19711

BB&T
ATTN: OFFICER, AGENT, MANAGING AGENT
PO BOX 1847
WILSON, NC 27894

BB&T
ATTN: OFFICER/AGENT/MANAGING AGENT
PO BOX 580340
CHARLOTTE, NC 28258-0340

BISHOP STACCATO POWELL
3339 WEST HAMMER LANE
SUITE C 153
STOCKTON, CA 95209

BISHOP STANLEY BANKS
251 ASHMOORE LANE
RIEGELWOOD, NC 28456

CAPITAL ONE
ATTN: OFFICER/AGENT/MANAGING AGENT
3451 HARRY S. TRUMAN BLVD
SAINT CHARLES, MO 63301

CAPITAL ONE
ATTN: OFFICER/AGENT/MANAGING AGENT
PO BOX 71083
CHARLOTTE, NC 28272-1083

CHASE CARD SERVICES
ATTN: OFFICER/AGENT/MANAGING AGENT
PO BOX 15298
WILMINGTON, DE 19850-5298

DEACON ISREAL JONES
1250 CEDAR GROVE RD SW
SUPPLY, NC 28462

FIRST NATIONAL BANK
ATTN: OFFICER, AGENT, MANAGING AGENT
4140 E. STATE STREET
HERMITAGE, PA 16148

HOME DEPOT
ATTN: OFFICER/AGENT/MANAGING AGENT
PO BOX 9001010
LOUISVILLE, KY 40290-1010

HSN
ATTN: OFFICER/AGENT/MANAGING AGENT
PO BOX 659707
SAN ANTONIO, TX 78265

LOWE'S
ATTN: OFFICER/AGENT/MANAGING AGENT
PO BOX 530914
ATLANTA, GA 30353-0914

LOWES SYNCHRONY BANK
ATTN: OFFICER/AGENT/MANAGING AGENT
PO BOX 530914
ATLANTA, GA 30353

MAXINE PUGHSLEY
2740 NW 13 CT
FORT LAUDERDALE, FL 33311

ONE MAIN FINANCIAL ATTN: OFFICER, AGENT, MANAGING AG 5051 MAIN STREET, STE 14 SHALLOTTE, NC 28470	QUICKEN LOANS ATTN: OFFICER, AGENT, MANAGA 635 WOODWARD AVE. DETROIT, MI 48226
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TOMMY WOODARD, JR
2369 GORE ROAD
LONGS, SC 29568